

VENDOR SUPPLEMENTAL INFORMATION

The following information is required for contract development.

1. In what state was your business formed? Delaware
2. Provide the following information for the person authorized to execute contracts on behalf of your organization:

Name Bill Quinlan Title Vice President Sales Operations
Email Address bill.quinlan@vigilantsolutions.com Telephone No. 925-398-2079
Mailing Address 1152 Stealth Street City Livermore State CA Zip 94551

3. Provide the following information for the contact person authorized to implement this contract on behalf of your organization:

Name Bill Quinlan Title Vice President Sales Operations
Email Address bill.quinlan@vigilantsolutions.com Telephone No. 925-398-2079
Mailing Address 1152 Stealth Street City Livermore State CA Zip 94551

4. Provide the following information for the person authorized to receive notices and communications regarding this contract on behalf of your organization:

Name Steve Cintron Title Treasurer
Email Address steve.cintron@vigilantsolutions.com Telephone No. 925-398-2079
Mailing Address 1152 Stealth Street City Livermore State CA Zip 94551

5. Select and complete one of the following:

a. ☐ **Sole Proprietorship**
i. Legal name of Sole Proprietor: _____
ii. Business address: _____
City _____ State _____ Zip _____

b. ☐ **General Partnership**
i. Legal name of Partnership: _____
ii. Business address: _____
City _____ State _____ Zip _____

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- c. ☐ **Limited Partnership**
- i. Legal name of Limited Partnership: _____
- ii. Names of General Partners: _____
- iii. Business address: _____
- City _____ State _____ Zip _____
- d. ☐ **Corporation**
- i. Legal name of Corporation: _____
- ii. Business address _____
- City _____ State _____ Zip _____
- e. ☒ **Limited Liability Company** Vigilant Solutions, LLC
- i. Legal name of Limited Liability Company: Vigilant Solutions, LLC
- ii. Business address 1152 Stealth Street
- City Livermore State CA Zip 94551
- f. ☐ **Other Entity (not listed)**
- i. Legal name and type of Company: _____
- ii. Business address _____
- City _____ State _____ Zip _____


6. a. Are you a publicly traded business? ☒ No ☐ Yes – where traded: _____

b. Are you a wholly owned subsidiary of a publicly traded business? ☐ No ☒ Yes – which publicly traded business: Motorola Solutions, Inc.

7. a. Is your business registered with the Texas Secretary of State? ☐ No ☒ Yes

b. If yes, please provide records or screenshot(s) from the Texas Secretary of State's website reflecting the name or names for which your business has been registered.

In signing this form, I acknowledge that I have read the above and state that the information contained therein is true and correct.

Signature:  Date: 3-14-2019

Print Name: Bill Quinlan Print Title: Vice President Sales Operations

TEXAS SECRETARY of STATE
DAVID WHITLEY[UCC](#) | [Business Organizations](#) | [Trademarks](#) | [Notary](#) | [Account](#) | [Help/Fees](#) | [Briefcase](#) | [Logout](#)**BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY**

Filing Number: 802309550
Original Date of Filing: October 8, 2015
Formation Date: N/A
Tax ID: [REDACTED]
Entity Type: Foreign Limited Liability Company (LLC)
Entity Status: In existence
FEIN: [REDACTED]
Name: Vigilant Solutions, LLC
Address: 1152 Stealth St.
Livermore, CA 94551 USA
Fictitious Name: N/A
Jurisdiction: DE, USA
Foreign Formation Date: January 7, 2005

REGISTERED AGENT	FILING HISTORY	NAMES	MANAGEMENT	ASSUMED NAMES	ASSOCIATED ENTITIES
Name		Address		Inactive Date	
C T Corporation System		1999 Bryan St. Suite 900 Dallas, TX 75201-3136 USA			

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